# FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

113	66	26	3
OMB	APPR(	DVAL	
OMB Num	ber:	3235	-0076
Expires: Estimated	April	30,20	008
Estimated `	averag	e burde	ก
hours per r	espons	e	16.00

SEC USE ONLY

DATE RECEIVED

UNITORM LIMITED OFFERING EXEM	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	iiden 9Ea
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE Wall Processing
A. BASIC IDENTIFICATION DATA	JAN 7 Oda
1. Enter the information requested about the issuer	2008
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Canadian Rockport Homes Int'l, Inc.	Washington, DC
Address of Executive Offices (Number and Street, City, State, Zip Code) 2317 Wall St., Vancouver B.C. V5L 1B8, Canada	Telephone Number (Including Area Code) (604) 669 - 1081
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)  2317 Wall St., Vancouver B.C. V5L 1B8, Canada Brief Description of Business	Telephone Number (Including Area Code) (604) 669 - 1081
The Company is in the business of manufacturing and erecting concrete buildings using its housing in developing nations.	™Uni-Crete Cell Process, primarily for residential
Type of Business Organization  Corporation  Imited partnership, already formed  business trust  Imited partnership, to be formed	lease specify): PROCESSED
Month Year  Actual or Estimated Date of Incorporation or Organization: 011 96 Actual Estin  Burisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State  CN for Canada; FN for other foreign jurisdiction)	1 /

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d/6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the Jederal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		, A. BASIC II	DENTIFICATION DATA		
2. Enter the information r	equested for the fo	illowing:			
Each promoter of	the issuer, if the is	suer has been organized	within the past five years;		
Each beneficial or	vner having the pov	ver to vote or dispose, or d	lirect the vote or disposition	of, 10% or more o	f a class of equity securities of the issue
<ul> <li>Each executive of</li> </ul>	ficer and director of	of corporate issuers and o	f corporate general and ma	naging partners of	partnership issuers; and
Each general and	managing partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, William R. Malone	if individual)				<del>- 1</del> -
Business or Residence Addr 3155 East Patrick Lane,	•	•	Code)	<del></del>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Donel Belsby	if individual)			· • • • •	
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	Code)		
2902 Cheney, Washington	n 99004				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Chris Kinch	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	(ode)		
La Estera 256, Parque In	dustrial Valle Gr	ande, Lampa Santiag	o, Chile		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	······································			
Grissel Rojas  Business or Residence Addre	as Olymbas and	Street City State 7:a C	lada)		
La Estera 256, Parque II	•		•		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City. State. Zip Co	ode)	···	

			•		В. 1	NFORMAT	ION ABOU	T OFFER	ING				
_								·	. d.: 66	-: O		Yes	No
1,	Has the	issuer sol	d, or does t								***************************************	Z	
	1171 :-	4b				n Appendix		_				<b>.</b> 5,0	00.00
2.	what is	the minim	ium investr	nent that v	vill be acco	ptea from	any individ	3uai?		*************	***************************************	Yes	No
3.	Does th	e offering	permit join	t ownersh	ip of a sing	gle unit?							
4,	Enter th	ne informa	tion reques	ted for cac	ch person v	vho has be	en or will	be paid or	given, dire	ectly or inc	lirectly, any	′	
	commis If a pers	sion or sim on to be lis	ilar remund ited is an as	ration for sociated p	solicitatior erson or ag	of purchas ent of a bro	ers in conn ker or deale	ection with er registere	sales of se d with the S	curities in SEC and/or	the offering. with a state	;	
	or state:	s, list the na	ame of the b	roker or d	caler. If m	ore than fiv	e (5) perso	ns to be lis	ted are asse		sons of such		
			you may s	<del>,</del>	e informat	ion for that	broker or	dealer only	y.				
Full	Name (	Last name	first, if ind	(vidual)									
Bus	iness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
Nan	ne of As	sociated B	roker or De	aler								· · · · · · · · · · · · · · · · · · ·	
Stati	es in Wh	ich Persor	Listed Ha	s Solicited	or Intend	to Solicit	Purchasers						
2101									• • • • • • • • • • • • • • • • • • • •	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□ Al	Il States
													(TEX)
	AL IL	AK IN	AZ IA	[AR]	KY	[CO]	CT ME	MD]	[DC]	FL MI	GA MN	MS)	MO]
	MT	NE	NV	[NH]	NJ	NM)	NY	NC)	[ND]	OH)	OK)	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	[WV]	WI	WY	PR
Full	Name (	Last name	first, if ind	ividual)		· · ·							
	`		<u> </u>						· <del></del>		<u></u> .		
Busi	iness or	Residence	Address ()	Number an	nd Street, C	City, State,	Zip Code)						
Nam	ne of Ass	sociated Br	oker or De	aler	<del></del>								
State			Listed Ha										
	(Check	"All States	" or check	individua	States)		**************					☐ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	ΝJ	NM	NY	NC	ND	OH)	OK]	OR	PA
	RI	SC	SD	TN	TX	UT]	[VT]	VA	WA	[WV]	<u>W</u> I	WY	PR
Full	Name (I	Last name	first, if ind	ividual)		<u> </u>							
Busi	ness or	Residence	Address (1	Number an	d Street, C	ity. State.	Zin Code)						
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·• • · · · · · · · · · · · · · · · · ·	,,,							
Nam	e of Ass	ociated Br	oker or De	aler									
State	s in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)			***************************************	•••••		***************************************	☐ All	States
	AL	[AK]	AZ	ΛR	CA	CO	CT	DE	[DC]	FL	GA	HI	ID
	IL.	ĪN	1A	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	HI TN	NJ TX	UT	NY VT	NC VA	(ND) (WA)	OH) WV	OK WI	OR WY	PA PR
	لخت	اليدا	ريون	114	بمب	لنف	لئ	ىمى	44	الاتنا	ىت	لشت	لحكيت

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		s
	Equity Common stock with attached warrant	10,000,000.00	
	√x Common		
	Convertible Securities (including warrants)	;	\$
	Partnership Interests		
	Other (Specify)		
	Total	10,000,000.00	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
			of Furchases
	Accredited Investors		·
	Non-accredited Investors	<del></del> :	<b>3</b>
	Total (for filings under Rule 504 only)		2
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		s
	Regulation A		s
	Rule 504		\$
	Total		s 0.00
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		s
	Legal Fees	<del></del>	<b>\$</b> 25,000.00
	Accounting Fees		s
	Engineering Fees	<del>-</del>	s
	Sales Commissions (specify finders' fees separately)	<del>_</del>	s
	Other Expenses (identify) (Including Printing Costs)	_	\$ 25,000.00
	Total	_	50,000.00

b. Enter the difference between the aggregate offering price given in responsand total expenses furnished in response to Part C — Question 4.a. This differenceds to the issuer."	<b>\$</b> 9,950,000,0	
. Indicate below the amount of the adjusted gross proceed to the issuer used each of the purposes shown. If the amount for any purpose is not know check the box to the left of the estimate. The total of the payments listed mu proceeds to the issuer set forth in response to Part C — Question 4.b about 15 miles and 15 miles and 15 miles and 15 miles are considered.	n, furnish an estimate and ist equal the adjusted gross	
	Payments to Officers, Directors, & Affiliates	Payments to Others
Corporate management expenses	<b>14</b> \$900,000,00	□\$
Purchase of real estate –second hectare macro-lot	□\$	\$790,000.00
Purchase, rental or leasing and installation of machinery and equipment	□\$	<b>⅓\$</b> 1,500,000.00
Construction or leasing of plant buildings and facilities – build-out Lampa 6 Mould Plant	<u>-</u>	\$1,000,000.00
Construction of initial phase of 35 homes	□s	<b>33</b> \$725.000.00
Urbanization of land within initial 3.4 hectare macro lot		
Urbanization of second 2.3 hectare macro lot	<b></b>	⊠\$ <u>1,250,000,00</u>
Working capital	<b>-</b>	<b>▼</b> \$ <u>500.000.00</u>
Other (specify): Launch of Operations Mexico	<b>\$</b>	<b>⊠</b> \$ <u>500.000.00</u>
Investment in Raw Material Inventory	□\$	<b>2</b> \$2,510,000,00
Roof Technology Development	□\$	\$150,000.00
	□\$	<b>\$</b> 125,000.00
Column Totals	<b>K</b> \$900,000,00	\$ <u>9,050,000,00</u>
Total Payments Listed (column totals added)	<b>X</b> ]\$9,950,000	00
D. FEDERAL SIG	NATURE	2013年1月1日 1月1日 1月1日 1月1日 1月1日 1月1日 1月1日 1月1日
he issuer has duly caused this notice to be signed by the undersigned duly author gnature constitutes an undertaking by the issuer to furnish to the U.S. Securit e information furnished by the issuer to any non-accredited investor pursual	ies and Exchange Commission	n, upon written request of its staff,
suer (Print or Type) Signature	Date	
anadian Rockport Homes Int'l, Inc.		/21/2007
ame of Signer (Print or Type) Title of Signer (Print	······	1-2,200,
illiam R. Malone President		

# - ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>X</b>
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Canadian Rockport Homes Int'l, Inc.	Warname	12/21/2007
Name (Print or Type)	Title (Print or Type)	
William R. Malone	President	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		- <del></del>		', <b>A</b>	PPENDIX		· ·		
1	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pr	4  f investor and urchased in State t C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		J							
AK									
ΑZ	ц			0	\$0.00	0	\$0.00		×
AR									[
CA	×			0	\$0.00	0	\$0.00		×
со	×			0	\$0.00	0	\$0.00		×
СТ									
DE									
DC							٠.		
FL	×			0	\$0.00	0	\$0.00	<u></u>	X
GA								<u> </u>	
ні									
ID	×			0	\$0.00	0	\$0.00		X
IL	×			0	\$0.00	0	\$0.00		×
IN	×			0	\$0.00	0	\$0.00		<b>x</b>
IA							· · · · · · · · · · · · · · · · · · ·		
KS									
KY	!								
LA									
ME									
MD									
МА									
МІ	×			0	\$0.00	0	\$0.00		×
MN	×			0	\$0.00	0	\$0.00		×
MS				<u></u>					

ŀ	<u>-</u>			API	PENDIX		•		
J	to non-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount p	4 of investor and urchased in State 1 C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо									
МТ	×			0	\$0.00	0			ж
NE									
NV									
NH									
NJ									
NM									
NY		l							
NC									
ND	×			0	\$0.00	0	\$0.00		X
он	×		·	0	\$0.00	0	\$0.00		<b>x</b>
ок									
OR									
PA	<u> </u>								
RI									
SC		_			 				
SD	×			0	\$0.00	0	\$0.00		×
TN									
TX	×			0	\$0.00	0	\$0.00		×
UT	×			0	\$0.00	0	\$0.00	1.	×
VT				<del>_</del>					
VA									
WA	×		<del></del>	0	\$0.00	0	\$0.00		и
WV				<del> </del>					]
WI	×			0	\$0.00	0	\$0.00		×

				APP	ENDIX .	4			
1	Intend	2 i to sell	3 Type of security and aggregate		5 Disqualification under State ULOE (if yes, attach				
-	to non-a	accredited is in State I-Item 1)	offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY	×			0	\$0.00	0	\$0.00		×
PR									

